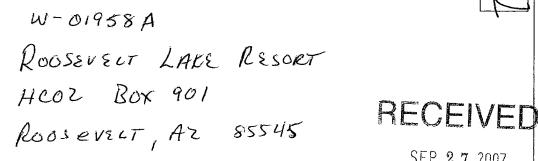
# ARIZONA CORPORATION COMMISSION **UTILITIES DIVISION**

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY





SEP 2 7 2007

AZ CORP COMM Director Utilities

# ANNUAL REPORT

FOR YEAR ENDING

2005 12 31

FOR COMMISSION USE

ANN04 05

## **COMPANY INFORMATION**

Company Name (Business Name	e) Rossevelt LAKE Reso	DET, INC. (WATER COMPA
Mailing Address HCO2 E  (Street)  (City)		,
Doolsus LT	AZ	85545
(City)	(State)	(Zip)
928-467-2276		928-812-3402
	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address dem leach	@ kahoo.com	
ocal Office Mailing Address		
<u> </u>	(Street)	
(City)	(State)	(Zip)
ocal Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		
	NAGEMENT INFORMATI	ON
MA	NAGEMENT INFORMATI	
MA	NAGEMENT INFORMATI	PRESIDENT (Title)
MA  Management Contact: Mic  // Coz Box Goi  (Street)	NAGEMENT INFORMATI	PRSSIDENT (Title)  AZ 85545 (State) (Zip)
MA Management Contact: Mic  // Coz Box 901  (Street)  928-467-2276	NAGEMENT INFORMATI  hael Leach  (Name)  Qoossvert  (City)	PRSSIDENT (Title)  AZ 85545 (State) (Zip)  928-812-3402
MA  Management Contact: Mic  // Coz Box Goi  (Street)  928-467-2276  Telephone No. (Include Area Code)	ANAGEMENT INFORMATI  Chael Leach  (Name)  Qoossvert  (City)  Fax No. (Include Area Code)	PRSSIDENT (Title)  AZ 85545 (State) (Zip)
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MA Management Contact: Mic  // Coz Box Goi  (Street)  928-467-2276  Telephone No. (Include Area Code)	ANAGEMENT INFORMATI  Chael Leach  (Name)  Roossvert  (City)  Fax No. (Include Area Code)  AS ABOVE*  AS ABOVE	PRSSIDENT (Title)  AZ 85545 (State) (Zip)  928-812-3402
Management Contact: Michael Management Contact: Michael Montact: Michael Management Contact: Michael Montact: Michael Montact: Montact	ANAGEMENT INFORMATI  Chael Leach (Name)  Qoossvert (City)  Fax No. (Include Area Code)  AS ABOVE*  18 As Above (Name)	PRSSIDENT (Title)  AZ 85545 (State) (Zip)  928-812-3402  Pager/Cell No. (Include Area Code)
MA  Management Contact: Mic  // Coz Box Gol  (Street)  928-467-2276  Telephone No. (Include Area Code)  mail Address Same  On Site Manager: Sam  (Street)	ANAGEMENT INFORMATI  Chael Leach  (Name)  Roossvert  (City)  Fax No. (Include Area Code)  AS ABOVE*  (Name)  (City)	PRSSIDENT (Title)  AZ 85545 (State) (Zip)  928-812-3402  Pager/Cell No. (Include Area Code)  (State) (Zip)

Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent: July	Mame) LEACH		
Henz Rox 901	ROOSEVELT	A	85545
Heor Box 901 (Street) 928-467-2274	(City)	(State)	(Zip)
928-467-2274			
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Pager/Cell No.	(Include Area Code)
Attorney:			
	(Name)		
(Street)	(City)	(State)	(Zip)
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (I	Include Area Code)
<del></del>	e address(es) have changed or are	_	e last filing.
Check the following box that applies	to your company:		
Sole Proprietor (S)	C Corporation (C	C) (Other than Ass	sociation/Co-op)
Partnership (P)	Subchapter S Co	rporation (Z)	
Bankruptcy (B)	Association/Co-o	p (A)	
Receivership (R)	Limited Liability	Company	
Other (Describe)			
	COUNTIES SERVED		
Check the box below for the county/ic	es in which you are certificated to pr	ovide service:	
<b>ДАРАСНЕ</b>	☐ COCHISE	□ coc	ONINO
⊠ GILA	☐ GRAHAM	GRE	ENLEE
☐ LA PAZ	☐ MARICOPA	□ мон	AVE
☐ NAVAJO	☐ PIMA	☐ PINA	L
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUM	A
□ STATEWIDE			

## UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.	
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)	
301	Organization	1145			
302	Franchises				
303	Land and Land Rights				
304	Structures and Improvements	5050			
307	Wells and Springs				
311	Pumping Equipment	29,059			
320	Water Treatment Equipment				
330	Distribution Reservoirs and Standpipes	11,848			
331	Transmission and Distribution Mains	70,424		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
333	Services				
334	Meters and Meter Installations	874			
335	Hydrants				
336	Backflow Prevention Devices				
339	Other Plant and Misc. Equipment				
340	Office Furniture and Equipment	3500			
341	Transportation Equipment				
343	Tools, Shop and Garage Equipment	43,100			
344	Laboratory Equipment	1,200			
345	Power Operated Equipment	7,500			
346	Communication Equipment				
347	Miscellaneous Equipment			<del></del>	
348	Other Tangible Plant				
	TOTALS	173,722			

This amount goes on the Balance Sheet Acct. No. 108

# **CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

Acct.		Original	Depreciation	Depreciation
No.	DESCRIPTION	Cost (1)	Percentage (2)	Expense (1x2)
301	Organization	1165	_	_
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	5050	5	252
307	Wells and Springs			
311	Pumping Equipment	29052	5	1452
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes	11,848	5	592
331	Transmission and Distribution Mains	70,426	5	3521
333	Services			
334	Meters and Meter Installations	874	5	44
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	3500	5	175
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment	43,106	5	2155
344	Laboratory Equipment	/ 200	5	60
345	Power Operated Equipment	7500	5	375
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	173, 722		8626

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_\_Acct. No. 403.

#### **BALANCE SHEET**

Acct		BALANCE AT BEGINNING OF	BALANCE AT
.No.	ASSETS	YEAR	END OF YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$	\$
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$	\$
	FIXED ASSETS		
101	Utility Plant in Service	\$	  \$
101	Property Held for Future Use	Φ	Φ
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant		
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	TOTAL FIXED ASSETS	\$	\$
	TOTAL ASSETS	\$	\$

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

# **BALANCE SHEET (CONTINUED)**

Acct.		BALANCE AT BEGINNING OF	BALANCE AT END OF
110.	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
218	Proprietary Capital (Sole Props and Partnerships)		
	TOTAL CAPITAL	\$	\$
	TOTAL LIABILITIES AND CAPITAL	\$	\$

#### COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 43,633	\$ 42,250
460	Unmetered Water Revenue		
474	Other Water Revenues	3003.73	,
	TOTAL REVENUES	\$ 46,63673	\$ 42,250
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 21, 470	\$ 18,000
610	Purchased Water		
615	Purchased Power	698.23	
618	Chemicals		
620	Repairs and Maintenance	11,170.81	2902-10
621	Office Supplies and Expense	19624	384.00
630	Outside Services	220,10	506,00
635	Water Testing	2252.34	285,00
641	Rents	2 400,00 3 2 00,00	2 400,00
650	Transportation Expenses	3 200,00	3200.00
657	Insurance – General Liability	1440.00	1440.00
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case	443.69	
675	Miscellaneous Expense		
403	Depreciation Expense	8626.00	8972.00
408	Taxes Other Than Income		
408.11	Property Taxes		2470.47
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 52,213:41	\$ 40,559.57
	OPERATING INCOME/(LOSS)	\$ (5,574.68)	\$ 40,559.57 \$ 1,690,43
	OTHER INCOME/(EXPENSE)	:	
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		Ψ
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
127	TOTAL OTHER INCOME/(EXPENSE)	\$	\$
	TOTAL OTHER MICORIE/(E/M ENSE)	+	Ψ
	NET INCOME/(LOSS)	\$ (5,576.68)	\$ 1,690.43

		<del></del>					
COMPANY NAME	11.	/	,	Ω			
COMPANY NAME	K	OUSSUELT	LAKE	KESCRT	LIVATER	11411111	
	-/\	,	DITTE	102300	WATER	UITICITY	

# SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End	\$
Meter Deposits Refunded During the Test Year	\$

#### WATER COMPANY PLANT DESCRIPTION

#### **WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
55-601762	3.5	30	125'	8"	2"	1964

<sup>\*</sup> Arizona Department of Water Resources Identification Number

#### **OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
10,000 gal tank	20	
1,200 gal pressure tank	5 h.p.	

BOOSTER PUN	BOOSTER PUMPS		FIRE HYDRANTS		
Horsepower	Quantity	Quantity Standard	Quantity Other		
5 h.p.	/	NONE	٥		
The second secon					

STORAGE TAN	KS	PRESSUR	E TANKS
Capacity	Quantity	Capacity	Quantity
10,000 901	/	3,000	1
5,000 gal	2		

CONTRACTOR AND A STATE OF STATE AND ADDRESS.	<b>/</b> )		7)			
COMPANY NAME	11	,	- 1/	/ .	3 A	
COMPANY NAME	1/ACLDIAL	1 Dre	Kesor	/ I NADET D	MTILION	
	Kooseverr	LAKE	MCTOKE,	WATER	UTILLOY	

#### WATER COMPANY PLANT DESCRIPTION (CONTINUED)

	MAINS	
Size (in inches)	Material	Length (in feet)
2	P.V.C.	1000
3	P.v.c	3600
4	P.V.C. P.V.C PVC	3500
5		
6		
8	GAL. Pros	36
10		
12		

CASE

For the following three items, list the utility owned assets in each category.

#### **CUSTOMER METERS**

COBTOLIZED	<del>~</del>
Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	138
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Tubo 4	
Comp. 6	
Tubo 6	

TREATMENT EQUIPMENT:

Chloring & Chomical Metering

STRUCTURES:

| Pump Buriding 6' x 8'

| Scump Block blog 6' x 8'

OTHER:

LAR TEST EQUIPMENT & Chemicals

310 TRENCHER & TRAILER

COMPANY NAME: RESOLUT LAKE RESOLUT WATER UTTLAY

#### WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2005

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY	126	229,574	NA
FEBRUARY	128	173,958	
MARCH	128	273,759	-1
APRIL	130	492,790	
MAY	130	492,790	
JUNE	131	667,693	
JULY	132	596,340	
AUGUST	135	511,130	
SEPTEMBER	138	529,310	
OCTOBER	138	404, 330	
NOVEMBER	/38	403,800	
DECEMBER	138	406,200	1/
	TOTAL	4,690,884	<i>V</i>

Is the Water Utility l	ocated in an ADWR Active Management Area (AMA)?
( ) Yes	( No
Does the Company h	ave an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
( ) Yes	(V) No
If yes, provide the G	PCPD amount:
What is the level of a (If more than one well, pl	ease list each separately.) mg/l

Note: If you are filing for more than one system, please provide separate data sheets for each

system.

# COMPANY NAME ROSEVELT LAKS RESORT WATER YEAR ENDING 12/31/2005

#### **PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2005 was: \$ 1748.34				
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.				
If no property taxes paid, explain why.				

# VERIFICATION AND SWORN STATEMENT

RECEIVED

**Taxes** 

SEP 2 7 2007

VERIFICATION				F	Z COR	P COI	ЙM
	COUNTY OF (COUNTY NAME	-			Director	Utiliti	es
STATE OF	C-14 NAME (OWNER	·	L) TITLE		5)		
I, THE UNDERSIGNED	COMPANY NAM	9 <i>6</i>	LEACH		RSSIDE	INT	
OF THE	NAME (OWNER  M I C III  COMPANY NAM  ROOSEUELT	LAKE	Resert	INC.	WATER	Co.	
DO SAY THAT THIS ANNI ARIZONA CORPORATION	···	ROPEF	RTY TAX A	ND SA	LES TAX	<u>REPOR</u>	т то тне
EOD THE VEAD ENDING	· ·	HTM	DAY		YEAR	<u> </u>  -	
FOR THE YEAR ENDING	12	2	31		2005		
CORRECT STATEM PERIOD COVERED MATTER AND THE INFORMATION AND SWORN STATEMENT I HEREBY ATTEST TO AND PAID IN FULL. I HEREBY ATTEST TO PAID IN FULL.	D BY THIS R HING SET FO ID BELIEF. THAT ALL PROI	EPOR' RTH, PERTY	I IN RES TO THE TAXES FO	SPECT BEST OR SAID	TO EAC OF MY	TH AND KNO	D EVERY WLEDGE, CURRENT
		ンソフ	icheel SIGNATURE	) L	all or OFFICIAL		
		928	8-467-2	276			
SUBSCRIBED AND SWORN TO I	BEFORE ME	TELE	HONE NUMBER				
A NOTARY PUBLIC IN AND FOR	THE COUNTY OF	COUNT	Y NAME				
THIS	DAY OF	MONT	I		.20		
(SEAL)		<del></del>					
MY COMMISSION EXPIRES	<del></del>		SIGNATU	RE OF NOTAL	RY PUBLIC		

INCOME TAXES			
For this reporting period, provide the following:			
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability			
State Taxable Income Reported Estimated or Actual State Tax Liability			
Amount of Grossed-Up Contributions/Advances:			
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances			
the tax year when tax returns are completed. Pursu Payer or if any gross-up tax refunds have already b	ill refund any excess gross-up funds collected at the close of pant to this Decision, if gross-up tax refunds are due to any seen made, attach the following information by Payer: name of gross-up tax collected, the amount of refund due to each as made the refund to the Payer.		
CERTIFICATION			
prior year's annual report. This certification is to	s refunded to Payers all gross-up tax refunds reported in the be signed by the President or Chief Executive Officer, if a partnership; the managing member, if a limited liability hip.		
Mila Level SIGNATURE	9/25/07 DATE		
MICHAEL LEACH PRINTED NAME	PRESIDENT		

#### VERIFICATION AND SWORN STATEMENT Intrastate Revenues Only

RECEIVEL AZ CORPORATION COMMISSION DIRECTOR OF WILLITIES

WATER

VERIFICATION

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) GILA NAME (OWNER OR OFFICIAL) TITLE PRESIDENT LEACH MICHAEL, ROOS EUELT

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH YEAR 2005 12 31

LAKE RESORT

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### **SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401. ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2005 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

, 42, 250,00

(THE AMOUNT IN BOX ABOVE

**INCLUDES \$** 

IN SALES TAXES BILLED, OR COLLECTED)

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

DAY OF

Level Rus 812-3402

COUNTY NAME GILA

MONTH AUGUST

20 07

<sup>EAL</sup>KATHER!NE Y. GARÇIA Notary Public - Arteona PIRE GHOLDOUNTYZO

#### VERIFICATION AND **SWORN STATEMENT** RESIDENTIAL REVENUE

RECEIVED

VERIFICATION

INTRASTATE REVENUES ONLY

GILA

AZ CORPORATION COMMISSION DIRECTOR OF UTILITIES

STATE OF ARIZONA

I, THE UNDERSIGNED

NAME (OWNER OR OFFICIAL)

MICHAEL COMPANY NAME

COUNTY OF (COUNTY NAME)

LEACH

PRESIDENT

OF THE

lux Resort WATER CO.

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

HTOOM DAY YEAR 31 2005 12

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01. ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2005 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

42, 250,00

(THE AMOUNT IN BOX AT LEFT

**INCLUDES \$** 

IN SALES TAXES BILLED, OR COLLECTED)

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

SIGNATURE OF OWNER OR OFFICIAL

928- 812-3402

TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

Drip

DAY OF

NOTARY PUBLIC NAME 2007

KATHERINE Y. GARCIA IPHILIX PURILES AIRONDA